



<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional)  5618P2977
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. November 20, 2006</div><div style="width: 50%; border: 1px solid black; padding: 2px;">In re Application of <b>William E. Webler</b> Application Number <b>10/027,877</b> Filed <b>12/19/2001</b></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 45%;">Signature  Typed or printed name <b>Si Vuong</b></div><div style="width: 50%; border: 1px solid black; padding: 2px;">For: <b>METHOD AND APPARATUS FOR DETERMINING INJECTION DEPTH AND</b> Art Unit <b>3736</b> Examiner <b>Jonathan M. Foreman</b></div></div>		
<p>Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) <span style="float: right;">\$500.00</span></p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div><input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:</div><div style="text-align: right;">11/27/2006 MBIZUNES 00000066 10027077 02 FC:1461 <span style="float: right;"><del>500.00</del> 00</span></div></div> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2666</u> I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.</b></p> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;">I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</div><div style="width: 50%; text-align: right;"> Signature  <u>Shelley M. Cobos, Reg. No. 56,174</u> Typed or printed name  11/20/06 Date</div></div> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>		
<input type="checkbox"/> *Total of _____ forms are submitted.		